

## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

12/12/94

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your Identification Number for that installation appears in the box The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management and documents required under Subtitle C of

EPA I.D. NUMBER ->

NY0000969147

FACILITY NAME -> JARNOW CORP

MAILING ADDRESS -> 30-00 47TH AVE - 6TH FLOOR LONG ISLAND CITY, NY 11101

INSTALLATION ADDRESS -> 30-00 47TH AVE - 6TH FLOOR LONG ISLAND CITY, NY 11101

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II **26 FEDERAL PLAZA** NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006 HAZARDOUS & SOLID WASTE PROGRAMS BRANCH **RCRA NOTIFICATIONS** 

TO: WEISZ, BENJAMIN MGR JARNOW CORP 30-00 47TH AVE - 6TH FLOOR LONG ISLAND CITY, NY 11101 uff nessery or were

completing this form. The information requested here is required by lew (Section 301) of the Resource Conservation and Recovery Act.



## NOTITICATION of Regulated Waste Activity

(For Official Use Only)

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EPA Form 8700-12 (Rev. 11-30-93) Previous edition is obsolete.

Continued on Reverse

II. Type of Regulated Waste Activity (Mark	TV in the ecomorists house: Refer to Instr	uctions)
II. Type of Regulated Waste Activity (Mark	de Activity	B. Used Oil Recycling Activities
Generator (See Instructions)	I's Treater, Storer, Disposer (C) Installation) Note: A permit is required for this activity; see	1. Used Oil Fuel Marketer    Marketer Directs Shipment of Used   Oil to Off-Specification Burner   Its Marketer Who First Claims the Used
h. 100 to 1000 trg/mo (200-2,200 Be.) c. Lees then 100 trg/mo (220 Be). Transporter (Indicate Mode in boxes 1-5 below).	finatrueton.  Hazardon (a.) (.)  Generator intuiti (.) (.) ( f.)	The Companies of the Specifications (Companies (Compani
in a. For own waste only b. For commercial purposes  Mode of Transportation	a. Boller and/or industrial Furnace  (c. Boller and/or industrial Furnace)  (c. Bonister Delen;  (d. Small Cuapity Exemption)  (e. Boller and/or industrial Furnace)  (e. Boller and/or industrial Furnace)  (f. Small Cuapity Exemption)  (indicate Type of Combustion)	b. Industrial Boller
1. Air 2. Rail 3. Highway 4. Water 5. Other apacity	Device(s) (1) (1) (1) (1) (1) (2) Industrial Science (3) Industrial Farmer	Transporter  b. Transfer Facility  Used Oil Processor/Re-refiner-Indicate Type(s) of Activity(les)
	S. Underground Injection Control	b, Re-refine
C Description of Hazardous Wastes (Use	additional sheets II necessary)	
A. Characteristics of Nonlisted Hazardous nonlisted hazardous wastes your installation [postering of the control of the contro	wastes. (Mark 'X' in the boxes correspont handles; See 40 CFR Parts 261.20 - 261.24 widely haracteristic. (List specific EPA hazardous wastern	
	X P 0 9 8	
Listed Hazardous Wastes. (See 40 CFR 2	3 4 10 110 110 110 110 110 110 110 110 11	ist more than 12 waste codes.)  5  6  11  12
C. Other Wastes. (State or other wastes requ	ulring a handler to have an I.D. number; See	Instructions.)
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X. Certification		in the language with I
i certify under penalty of law that this document system designed to assure that qualified person or persons who manage the system, or those persons who manage the system, or those persons of my knowledge and belief, true, accurate, including the possibility of fine and imprisonment.	ersons directly responsible for gathering the and complete. I am aware that there are signi	information, the information submitted is, to the ficant penalties for submitting false information.
Signature A	Name and Official Title (Type or p	office(
XI, Comments		
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